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Address 17950 Preston Rd., Suite 1000 City Dallas State TX Zip 75252 County United States Telephone 372-732-1001 Email knapp@slater-matsil.com Assignee Name and Address: NetSocket, Inc. 3701 W. Plano Pkwy., Suite 140 Plano, TX 75075 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Date Signature Date Signature Date Signature Date Signature Date Signature Date Signature Telephone 1 21/1 427 7 36/1	Firm		Slater & Matell I I P								
Country United States Telephone 972-732-1001 Assignee Name and Address: VelSocket, Inc. Assignee Name and Address: VelSocket, Inc. Acopy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SignAture SignAture of Attorney is authorized to act on behalf of the assignee signature and title is supplied below is authorized to act on behalf of the assignee Signature Vennetin H. Lewis Telephone 1 21/ 427 7 36/1		Idress									
Telephone 972-732-1001 Email knapp@slater-matsil.com Assignee Name and Address: VetSocket, Inc. 3701 W. Plano Pkwy., Suite 140 Plano, TX 75075 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature The dividual whose application in which this prover of Attorney is to be filed. Signature Date (Signature Date	City		Dallas		State	TX		Zip .	75252		
Sasignee Name and Address: NetSocket, Inc.	Country		United States								
NetSocket, Inc. 701 W. Plano Pkwy., Suite 140 Plano, TX 75075 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTC/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. **SignATURE of Assignee of Record** The addividual where agreement and title is supplied below is authorized to act on behalf of the assignee. Date **Signature** Date **Signature** Name Kenneth H. Lewis Telephone **1 21 4 427 7 36/1	Telephone		972-732-100	Email knapp@sl	ater-ma	tsil.com					
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The individual whose construction and title is supplied below is authorized to act on behalf of the assignee Signature Date 800-08 Name Kenneth H. Lewis Telephone +1 21/ 427 7 36/ Title President & C.E.O.	filed in ea	ach applicat itioners app	ion in which t ointed in this	this form is used. form if the appoi	The stateme	nt under 37 CFR 3. ner is authorized t	73(b) ma	ay be compl	eted by c	ne of	
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